

## Real Estate Appraiser Certification Application

FOR VALIDATION ONLY

### Non-Refundable Fee: \$246.00

Make remittance payable to State Treasurer.  
Send this application with your remittance to:  
Department of Licensing  
PO Box 9048  
Olympia, WA 98507-9048

*Check one only:*

☐ **Certified General**      ☐ **Certified Residential**      ☐ **State Licensed**

### Instructions

*Please type or print clearly*

You may attain Licensure/Certification to practice real estate appraisal in the State of Washington by meeting the requirements in RCW 18.140 and WAC 308.125.

You must also:

- Complete, sign, and submit this application
- Submit official college transcripts or copies of course certificates, together with confirmation of examination passage
- Submit the required fee

### Out-of-state licensees must also include:

- A Notarized Consent to Service.

**All fees are non-refundable.** Applications will be kept on file for a period of six months for you to correct any discrepancies other than the appraisal experience log.

### Applicant Information

APPLICANT'S NAME <i>(last, first, middle)</i>			DATE OF BIRTH	
MAILING ADDRESS				
CITY	STATE	ZIP	COUNTY	
BUSINESS NAME				
BUSINESS ADDRESS <i>(current physical place of business is required)</i>				
CITY	STATE	ZIP	COUNTY	
TELEPHONE NO. <i>(during normal business hours)</i> (      )		SOCIAL SECURITY NO. <i>(required per RCW 26.23.150)</i>		GENDER <i>(M or F)</i>
Have you ever applied for licensure/certification as a real estate appraiser in Washington state?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently licensed/certified as a real estate appraiser in Washington state?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
IF YES, PROVIDE LICENSE/CERTIFICATE NO.				
Are you currently licensed in Washington State as a real estate salesperson, broker or associate broker, or escrow agent?			<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Upon Filing, This Application Becomes a Public Record and is  
Subject to Public Disclosure Provisions Pursuant to RCW 42.56**

*The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 664-6504 or TTY (360) 664-8885.*

## Personal Data



If any of the following questions are answered **Yes**, provide full details on a separate (8 1/2" x 11") sheet attached to this application.

- |  | Yes                      | No                       |
|--|--------------------------|--------------------------|
| 1. With the exception of motor vehicle violations, have you ever been convicted of a crime, felony, or misdemeanor by this state, any other state, the federal government, or any other jurisdiction within the past ten years?                                | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has any application for a professional or occupational license or permit made by you ever been denied, or has a license or permit issued to you ever been suspended, revoked, censured, or fined, in this state or any other jurisdiction?                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you ever had a civil court order, verdict, or judgement entered against you in any court or competent jurisdiction in which the subject matter involved any real estate or business related activity? Have you ever entered a plea of nolo contendere? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever used any name other than the one herein given, either initials, surname, maiden name, or alias?   | <input type="checkbox"/> | <input type="checkbox"/> |

## Qualifying Experience and General Work History

- Total number of hours of experience in **residential** real estate appraising: \_\_\_\_\_
- Total number of hours of experience in **non-residential** real estate appraising: \_\_\_\_\_

List in chronological order all real estate appraiser work experience. If you are (or have been) self-employed, and the sole proprietor of the company, please list the company name and enter "self" under "Employer or Supervisor." You may attach additional pages if necessary.

NAME OF COMPANY	YOUR TITLE/POSITION	COMPANY TELEPHONE NO. (     )	EMPLOYER/SUPERVISOR NAME	
COMPANY ADDRESS		DATES (from-to)	MONTHLY HOURS	TOTAL HOURS
DUTIES				
NAME OF COMPANY	YOUR TITLE/POSITION	COMPANY TELEPHONE NO. (     )	EMPLOYER/SUPERVISOR NAME	
COMPANY ADDRESS		DATES (from-to)	MONTHLY HOURS	TOTAL HOURS
DUTIES				
NAME OF COMPANY	YOUR TITLE/POSITION	COMPANY TELEPHONE NO. (     )	EMPLOYER/SUPERVISOR NAME	
COMPANY ADDRESS		DATES (from-to)	MONTHLY HOURS	TOTAL HOURS
DUTIES				
NAME OF COMPANY	YOUR TITLE/POSITION	COMPANY TELEPHONE NO. (     )	EMPLOYER/SUPERVISOR NAME	
COMPANY ADDRESS		DATES (from-to)	MONTHLY HOURS	TOTAL HOURS
DUTIES				

## Educational Requirements



An official college transcript or course certificate together with evidence of examination passage must be submitted for all courses listed. You must have successfully completed course work as specified in WAC 308-125-030, 308-125-040, 308-125-045, and 308-125-050.

COURSE TITLE	DATES ATTENDED (Month/Year) FROM TO	TOTAL CLASS ROOM HOURS/ COLLEGE CREDITS (Qtr. or Sem.)	COURSE SPONSOR	COURSE LOCATION (City & State)

## Certification/Licensure in Another State

List all licenses/certifications obtained in other states and indicate whether active or inactive.

STATE	DATE ISSUED (month and year)	NUMBER	ACTIVE/INACTIVE	EXPIRATION DATE (month and year)

## Applicant Attestation

I, the undersigned, certify that I am the person referred to in the foregoing application for licensure/certification as a real estate appraiser in the state of Washington, that I have read and understand RCW 18.140 and WAC 308-125, and that the statements herein are true to the best of my knowledge and belief.

I hereby authorize all organizations, my references, employers (*past and present*), business and professional associates (*past and present*), and all governmental agencies and instrumentalities (*local, state, federal or foreign*) to release to the Department of Licensing any information, files, or records requested by the department in connection with the processing of this application.

I have carefully read the questions in the foregoing application and have answered them completely, without reservations of any kind, and I declare under penalty of perjury that my answers and all statements made by me herein are true and correct. Should I furnish any false information in this application, I hereby agree that such act shall constitute **cause for the denial, suspension, or revocation** of my certification/license to practice as a certified/licensed real estate appraiser in the state of Washington.

**Incomplete Application Cannot Be Processed.**

X

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

## Experience Log Instructions and Information



- Submit a completed experience log with your application for approval to sit for the Real Estate Appraiser Examination. The work product claimed for experience credit must conform to USPAP or WAC 308-125-070(3) and be verifiable.
- Experience hours required for the different levels of licensure/certification to become a Real Estate Appraiser are:
  - State Licensed Appraiser=2000 hours of experience credit in no less than a 24 month period.
  - Certified Residential Appraiser=2500 hours of experience credit in no less than a 24 month period.
  - Certified General Appraiser=3000 hours of experience credit in no less than a 30 month period.(A minimum of 1500 hours must be non-residential appraisal experience.)
- Hours claimed must not exceed the maximum credits allowed per WAC 308-125-075. Limited Appraisals with a Summary Report will be granted eight (8) hours. No credit will be granted for Restricted Appraisal Reports or Administrative Appraisal Reviews.
- Use the property type codes (1-6) and appraisal report type codes (A-E) listed on the assignment sheet.
- You may reproduce the log form or use your own as long as it contains **all** required information.
- You must possess a copy of each appraisal listed on the log for experience credit.

## Verification by Oath or Affirmation

I, \_\_\_\_\_, affirm and state that the attached Real Estate Appraiser Experience Log is true and correct. For each assignment listed, I further state and affirm that I have signed or been recognized in the report, been responsible for and provided significant contribution to the entire appraisal report, even though I may not have performed the entire appraisal process. Where the experience claimed is in the capacity of a review appraiser, I state and affirm that in reviewing each appraisal and reporting the results of that review, I formed an opinion as to the adequacy and appropriateness of the report being reviewed and clearly disclosed the nature of the review process undertaken. Upon the request of the Department of Licensing, I shall make available for examination copies of any of the appraisal reports prepared by me in the course of my practice.

I affirm and state that I have acquired the requisite hours of real estate appraisal experience in connection with the appraisals listed in the Experience Log.

Signature of Applicant **X** \_\_\_\_\_ Date \_\_\_\_\_

## Consent to Service - *must be notarized (for out-of-state licensees only)*

I, the undersigned, residing in the state of \_\_\_\_\_, have obtained or are about to obtain a license/certification from the State of Washington to engage or continue in the business of real estate appraising and hereby irrevocably consent that suits and actions may be commenced against me in any county of the State of Washington in which any party/plaintiff having cause of action against me may reside and that service of any process or pleading in said action or suit may be made by delivering same to the Director of the Department of Licensing of the State of Washington, at Olympia, Washington.

In witness hereof this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

at \_\_\_\_\_

**X**

SIGNATURE

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

SEAL

NAME TYPED OR PRINTED

SIGNED OR ATTESTED BEFORE ME ON

BY

**X**

SIGNATURE

NAME TYPED OR PRINTED

TITLE

EXPIRATION DATE OF APPOINTMENT

CLIENT	CLIENT CONTACT	CLIENT TELEPHONE NO. (    )	
BORROWER/OWNER	PROP. TYPE CODE	APP/RPT CODE	HOURS
PROPERTY ADDRESS ( <i>Street, city, state, zip</i> )		DATE	
CLIENT	CLIENT CONTACT	CLIENT TELEPHONE NO. (    )	
BORROWER/OWNER	PROP. TYPE CODE	APP/RPT CODE	HOURS
PROPERTY ADDRESS ( <i>Street, city, state, zip</i> )		DATE	
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**Property Type Codes**

- |                          |                               |
|--------------------------|-------------------------------|
| <b>1</b> SFR non-complex | <b>4</b> Commercial form      |
| <b>2</b> SFR complex     | <b>5</b> Commercial narrative |
| <b>3</b> SFR land        | <b>6</b> Other (explain)      |

**Appraisal & Appraisal Report Type Codes**

- |   |   |
|---|---|
| <b>A</b> Complete w/self-contained report | <b>D</b> Ltd. w/summary report          |
| <b>B</b> Complete w/summary report        | <b>E</b> Review appraisal report        |
| <b>C</b> Ltd. w/self-contained report     | <b>F</b> No Restricted Reports Accepted |